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MEMO ENDORSED

November 17, 2020

BY ECF

Honorable William H. Pauley III
United States District Judge
Southern District of New York
Daniel Patrick Moynihan United States Courthouse
500 Pearl St.
New York, NY 10007

Re: *United States v. Lywan Reed, et al.*, 19 Cr. 931 (WHP)

Dear Judge Pauley:

I am the attorney for Lywan Reed, a defendant in the above-referenced matter. On October 21, 2020, Mr. Reed pled guilty to Counts Two and Four of the above-referenced Indictment. He is currently on home detention with electronic monitoring and the Court has ordered Mr. Reed to self-surrender for remand pending sentencing by November 18, 2020 at 11:00 am. The Court provided Mr. Reed additional time to self-surrender so that he could address some medical issues he was having.

Mr. Reed has been referred to Lenox Hill Radiology for an MRI, scheduled to take place on November 21, 2020. The referral was made by the neurology department at Downstate Medical Center. A copy of the appointment letter from Lenox Hill Radiology is attached hereto. So that Mr. Reed can have his MRI and have sufficient time to get the results, and because of the intervening holiday, we request that Mr. Reed's self-surrender date be extended to Monday, November 30, 2020 at 11:00 am. We also request that the Court Order that in order to facilitate the medical procedure prior to surrender, Mr. Reed shall report to Pretrial Services to have his

location monitoring equipment removed. As soon as the medical procedure is concluded, Mr. Reed shall return to Pretrial Services to have the location monitoring equipment reinstalled.

I thank the Court for its continued consideration in this matter.

Respectfully submitted,

/s/

Renato C. Stabile

attachment

cc: AUSA Rebecca Dell (via ECF)
Bernisa Mejia, Pretrial Services Officer (via email)

Mr. Reed's surrender date is adjourned to 11:00 a.m. on
November 24, 2020.

SO ORDERED:


WILLIAM H. PAULEY III
U.S.D.J.

November 17, 2020



Manhattan
Brooklyn
Queens
Bronx
Long Island

Hello LYWAN REED,

Thank you for choosing Lenox Hill Radiology.

SAFETY MATTERS:

Our priority is to keep our patients and team members healthy and safe and we have taken many steps so that you can be confident during your visit.

For more information on what to expect when you visit our center, please read our safety measures and view our video by clicking here:

[\(https://rebrand.ly/LHR_SafetyMatters_R\)](https://rebrand.ly/LHR_SafetyMatters_R)

- During this challenging time, for the safety and health of all patients, we are asking you to refrain from bringing any guests into our centers. If you require assistance, you may bring one person with you, but that person will be subject to the same screening guidelines as our patients.

- For your appointment, please bring a photo ID, insurance card, and any paperwork your provider might have given you.

- Reminder: Any co-pay, deductible, or co-insurance will be due at the time of service.

- If you have Medicare insurance, please be sure to bring your updated Medicare card for your appointment. Beginning 01-01-2020, Medicare will no longer approve claims with your Old ID, i.e. your social security number. Your new card should be a mix of letters and numbers whereas your old card was numbers with a letter at the end.

You have been scheduled for the following exam(s):

MRI BRAIN WITHOUT CONTRAST

Saturday, November 21 2020

03:05 PM

Patient Prep:

- Please avoid wearing hairpins and jewelry to your scheduled appointment.
- If you have metal hardware in the areas being imaged, please call our office for further instructions.
- If you wear a Continuous Glucose Monitoring System or Neulasta device, for your safety you will have to remove the device before having your exam. The exam cannot be performed with the device in place regardless of the procedure or body part being imaged. Please bring a replacement sensor/transmitter to wear following your exam.

FOR ALL MR EXAMS

- If you have a pacemaker or heart defibrillator, please call our office immediately.
- If you wear a cardiac monitor, Medtronic drug infusion system, nerve stimulator, programmable shut, stent, eye or ear implant we need the following information in order to ensure it is safe for you to have your exam.
 - Need:
 - Device Name
 - Device Model (Vendor name)

 Add to my calendar**Lenox Hill Radiology**

BROOKLYN AVE

1014 Brooklyn Avenue

Brooklyn, NY 11203

718-282-7000

Driving Directions
(<http://bit.ly/2aCH0BA>)[\(http://bit.ly/2aCH0BA\)](http://bit.ly/2aCH0BA)